

LAKELAND HEALTH CARE CENTER

W3930 CTY RD NN

ELKHORN

53121

Phone:(262) 741-3600

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 158

Total Licensed Bed Capacity (12/31/04): 235

Number of Residents on 12/31/04: 147

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 173

County

Skilled

No

Yes

Yes

173

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		0.0
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		48.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.7	Under 65	12.2	More Than 4 Years		51.7
Day Services	No	Mental Illness (Org./Psy)	27.9	65 - 74	11.6			-----
Respite Care	No	Mental Illness (Other)	2.0	75 - 84	19.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	44.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.6	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	15.0	65 & Over	87.8	-----		
Transportation	No	Cerebrovascular	14.3		-----	RNs		14.8
Referral Service	No	Diabetes	4.1	Gender	%	LPNs		8.1
Other Services	No	Respiratory	0.7	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	35.4	Male	21.1	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	78.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care					
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	12	9.3	130	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	12	8.2
Skilled Care	5	100.0	203	115	89.1	130	0	0.0	0	12	92.3	180	0	0.0	0	0	0.0	0	132	89.8
Intermediate	---	---	---	2	1.6	130	0	0.0	0	1	7.7	158	0	0.0	0	0	0.0	0	3	2.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	5	100.0		129	100.0		0	0.0		13	100.0		0	0.0		0	0.0		147	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	0.0	Bathing	0.0	49.7	50.3	147
Private Home/With Home Health	0.0	Dressing	6.1	52.4	41.5	147
Other Nursing Homes	0.0	Transferring	19.7	41.5	38.8	147
Acute Care Hospitals	0.0	Toilet Use	12.2	44.9	42.9	147
Psych. Hosp.-MR/DD Facilities	0.0	Eating	34.0	42.9	23.1	147
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.0					
Total Number of Admissions	0	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	7.5		Receiving Respiratory Care	17.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	75.5		Receiving Tracheostomy Care	0.7
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	44.9		Receiving Suctioning	0.0
Other Nursing Homes	0.0				Receiving Ostomy Care	2.7
Acute Care Hospitals	0.0	Mobility			Receiving Tube Feeding	6.8
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.7		Receiving Mechanically Altered Diets	46.3
Rehabilitation Hospitals	0.0				*****	
Other Locations	1.8	Skin Care			Other Resident Characteristics	
Deaths	98.2	With Pressure Sores	4.8		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	0.0		Medications	
(Including Deaths)	55				Receiving Psychoactive Drugs	65.3

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government %	Peer Group Ratio	Bed Size: 200+ %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	73.6	87.2	0.84	88.7	0.83	87.7	0.84	88.8	0.83
Current Residents from In-County	78.2	54.3	1.44	28.7	2.73	70.1	1.12	77.4	1.01
Admissions from In-County, Still Residing	0.0	25.2	0.00	14.4	0.00	21.3	0.00	19.4	0.00
Admissions/Average Daily Census	0.0	55.2	0.00	35.1	0.00	116.7	0.00	146.5	0.00
Discharges/Average Daily Census	31.8	59.6	0.53	39.2	0.81	117.9	0.27	148.0	0.21
Discharges To Private Residence/Average Daily Census	0.0	21.2	0.00	10.4	0.00	49.0	0.00	66.9	0.00
Residents Receiving Skilled Care	98.0	87.1	1.12	80.3	1.22	93.5	1.05	89.9	1.09
Residents Aged 65 and Older	87.8	87.7	1.00	89.8	0.98	92.7	0.95	87.9	1.00
Title 19 (Medicaid) Funded Residents	87.8	77.9	1.13	80.4	1.09	68.9	1.27	66.1	1.33
Private Pay Funded Residents	8.8	16.8	0.53	16.4	0.54	19.5	0.45	20.6	0.43
Developmentally Disabled Residents	0.7	0.5	1.45	0.3	2.30	0.5	1.38	6.0	0.11
Mentally Ill Residents	29.9	46.5	0.64	38.5	0.78	36.0	0.83	33.6	0.89
General Medical Service Residents	35.4	21.0	1.69	25.0	1.41	25.3	1.40	21.1	1.68
Impaired ADL (Mean)	62.7	44.6	1.41	39.1	1.61	48.1	1.30	49.4	1.27
Psychological Problems	65.3	66.5	0.98	63.5	1.03	61.7	1.06	57.7	1.13
Nursing Care Required (Mean)	9.8	8.7	1.13	8.2	1.19	7.2	1.35	7.4	1.32